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PTO/SE/81 (02-01)

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# **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	09/914,622
Filing Date	February 29, 2000
First Named Inventor	Sheena M. Loosmore
Title	Multicomponent Vescine Comprising at level Three entigens
Group Art Unit	1645
Examiner Name	
Attorney Docket Number	1038-1183

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Firm Indivi	or dual Name	Aventis Pasteur Limi	ited							
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Address City		T		<del></del>		I		<del></del>		
Country		Toronto Canada			State	Ontarlo		Zip M2R	3T4	
Telephone		416-667-2701		<del></del> 1	Fax	416-667-24	159			
I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).										
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PTO/58/86 (06-00)
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U.S.Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid QMB control number. STATEMENT UNDER 37 CFR 3.73(b) Applicant/Patent Owner: Aventis Pasteur Limited Application No./Patent No.: 09/914,622 \_\_Filed/Issue Date: February 29, 2000 Entitled: Multicomponent Vaccine Comprising at least Three antigens to Protect Against Disease caused by Haemophilus influenzae Aventis Pasteur Limited . a Corporation (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.) states that it is: 1. The assignee of the entire right, title, and interest, or 2. an assignee of less than the entire right, title and interest. The extent (by, percentage) of its ownership interest is in the patent application/patent identified above by virtue of either: A. [r] An assignment from the inventor(s) of the patent application/patent identified above. The assignment assignment was recorded in the United States Patent and Trademark Office at Reel/Frame 012335/0099 012334/0737 012334/0728 or forwhich a copy thereof is attached, **OR** B. [ ] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below: 1. From: To: The document was recorded in the United States Patent and Trademark Office at \_\_\_\_, or for which a copy thereof is attached. The document was recorded in the United States Patent and Trademark Office at \_\_\_\_, or for which a copy thereof is attached. 3. From:\_ The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame\_ \_\_\_\_, or for which a copy thereof is attached. [ ] Additional documents in the chain of title are listed on a supplemental sheet. [ ] Copies of assignments or other documents in the chain of title are attached. INOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08] The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee. Date Typed or printed name Signature

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Title

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PTO/SB/62 (10-00)

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# **REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	09/914,622
Filing Date	February 29, 2000
First Named Inventor	Sheena M. Loosmore
Group Art Unit	1645
Examiner Name	
Attorney Docket Number	1098-1183

l hereby application	revoke all pre on:	evious powers of attorney or at	uthorizatio	ons of a	gent given in t	the abo	ve-identified	t
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I am the:		,						
Appi	licant/Invento	<b>1.</b>						
. Ass	ignee of reco	rd of the entire interest. See 3	7 CFR 3.1	71				
State	ement under	37 CFR 3.73(b) is enclosed. (I	Form PTC	)/SB/96	y			
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
□ *Total of _		are submitted.						
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PATENT

Docket No.: 1038-1183

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants

Loosmore et al.

Application No.:

09/914,622

Filing Date

February 29, 2000

Title

Multicomponent Vaccine Comprising at least Three)

Antigens To Protect Against Disease caused by)

Haemophilus influenzae

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#### REVOCATION AND POWER OF ATTORNEY

Dear Sir:

Attached is a Revocation of Power of Attorney for the above identified application and an authorization of agent.

Please direct all future communications relative to said application to the following correspondence address:

GAVIN ZEALEY AVENTIS PASTEUR 1755 STEELES AVE WEST TORONTO CANADA M2R 3T4

TEL 416 667 2854 FACSIMILE 416 667 2459

Respectfully submitted

Gavin R. Zealey Reg. No. 39,475 May 8, 2003

Customer Number 33 444